PTO/SB/06 (08-00)

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PATENT APPLICATION FEE DETERMINATION RECOR												
							L	Y3-8				
CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA						RA	TE	FEE	1	RATE	FEE	
		1.0.1	.vo.			1	I E	PEE		KAIE	PEE	
	SIC FEE CFR 1.16(a))					·		s	OR		\$	
TOT.	AL CLAIMS CFR 1.16(c))	27	minu	s 20 = *	7	x \$ <u>9</u> = 0.00		 	OR	x \$ <u>18</u> =		
IND	EPENDENT CLA		min	us 3 = *	2	x 43_= 0.00		OR	x 86_ =	172.00		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+	=	0.00	OR	+_ =			
☀ If the difference in column 1 is less then zero, enter "0" in column 2							AL	0.00	OR	TOTAL	298.00	
CLAIMS AS AMENDED - PART II										OTHER T	HAN	
(Column 1) (Column 2) (Column 3)						SMA	LL E	ENTITY	OR .	SMALL E		
AMENDMENT A		CLAIMS	w wyga god	HIGHES	4			ADDI-			ADDI-	
	,	REMAINING AFTER	j	NUMBE PREVIOUS		RAT	ΓE	TIONAL		RATE	TIONAL	
	,	AMENDMEN	T	PAID FC				FEE			FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	_#		OR	x \$ =		
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	II		OR	x =		
	FIRST PRESENTATION OF MULTIPLE DEPENDE			ENDENT CLA	AIM (37 CFR 1.16(d))	┤			OR			
							`AL		OR OR	+= TOTAL		
	(Column 1) (Column 2) (Column 3)				ADDIT. F				DDIT. FEE			
AMENDMENT B	*	CLAIMS	_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	HIGHES	i i	Ш		ADDI-			ADDI-	
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		AMENDMEN	1T 34 32 3	PAID FC				FEE			FEE	
	Total (37 CFR 1.16(e))	*	Minus	**	=	x \$	_=		OR	x \$=		
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	_=		OR OR	x=		
	FIRST PRESENTATION OF MULTIPLE DI		MULTIPLE DEF	PENDENT CLAIM (37 CFR 1.16(d))		1	_		OR	+ =		
TOTAL									OR OR	TOTAL		
	7.TFs2 (c	(Column 1)		(Column 2)) (Column 3)	ADDIT.	FEE		A	DDIT. FEE		
AMENDMENT C		CLAIMS		HIGHES				ADDI-			ADDI-	
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	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	=		OR	x \$=		
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	_=		OR OR	x=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						_=		OR	+=		
TOTAL OR TOTAL												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ADDIT. FEE ADDIT. FEE												
*** If	*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											